Transport adaptation: Creating resilient local transport infrastructure – through transport and health

Dr Adrian Davis, NHS Bristol
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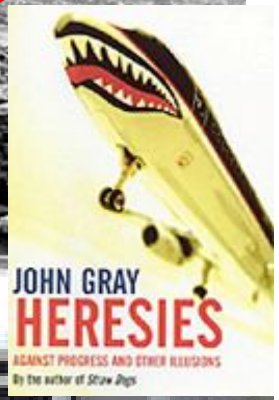
More space for motor vehicles =less for pedestrians/ cyclists

Inner Leeds 1963

In total 365 homes and 174 commercial buildings were raised to the ground. People who were living in the demolished houses were moved to new estates such as Little London.

The myth of progress



1990s

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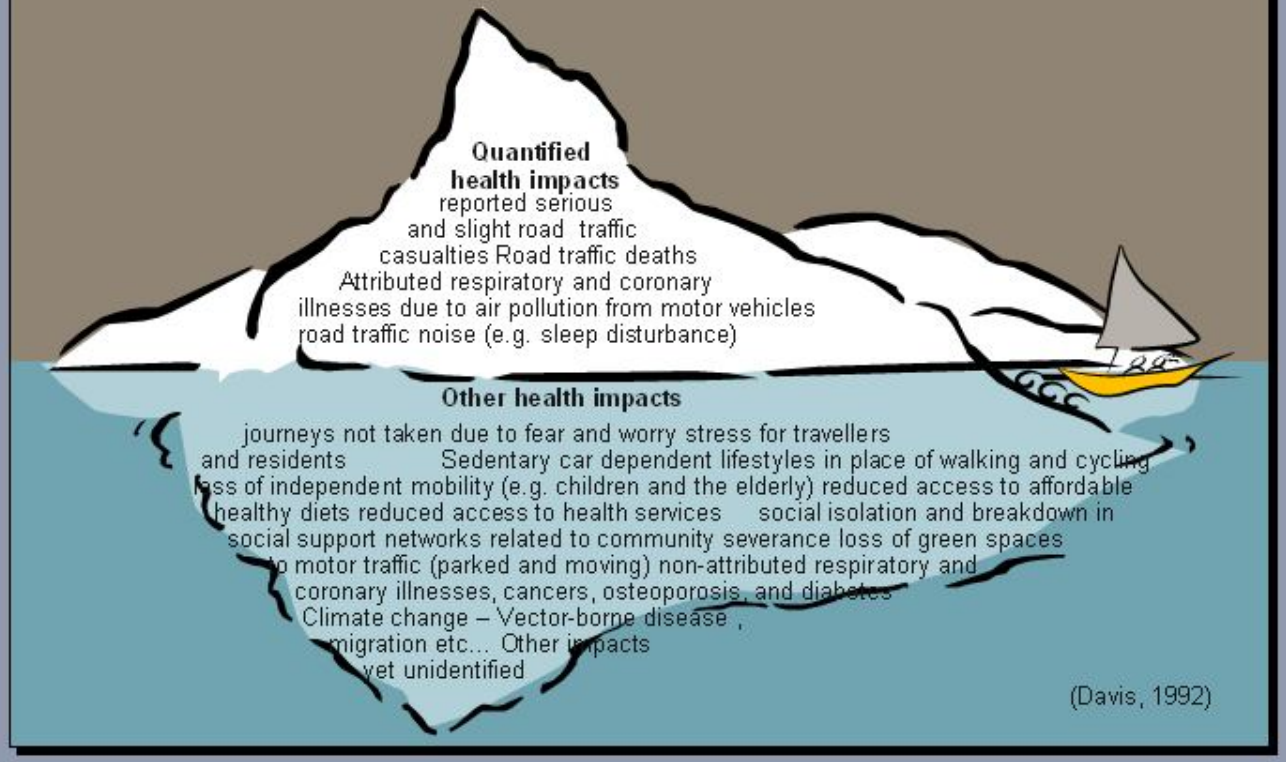
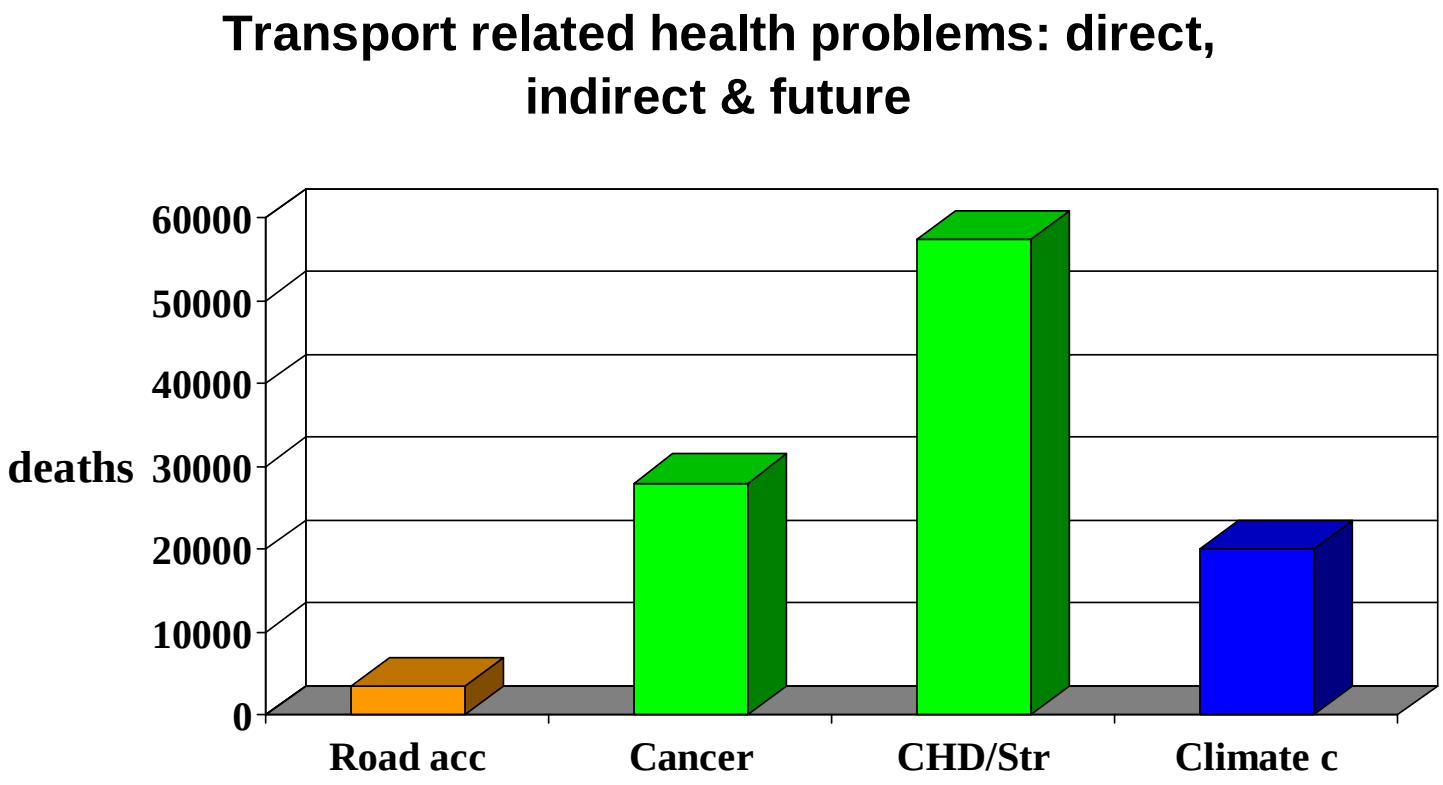
The Road Transport Morbidity and Mortality Iceberg



Slide 3 of 18 | Presentation3

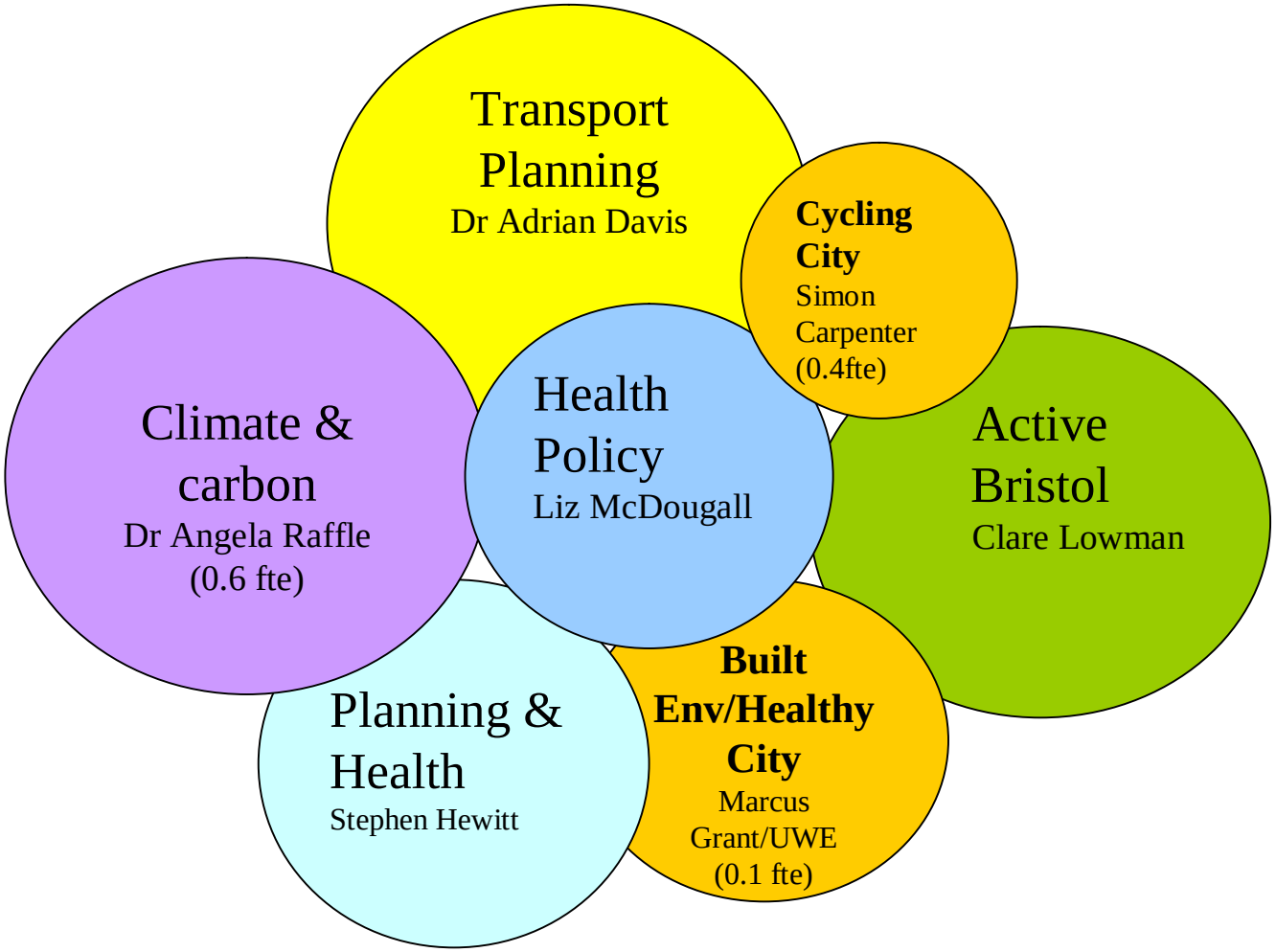
The disease-burden from road transport



Source: Cycling & Health – What's the evidence? Cavill, N., Davis, A. 2007

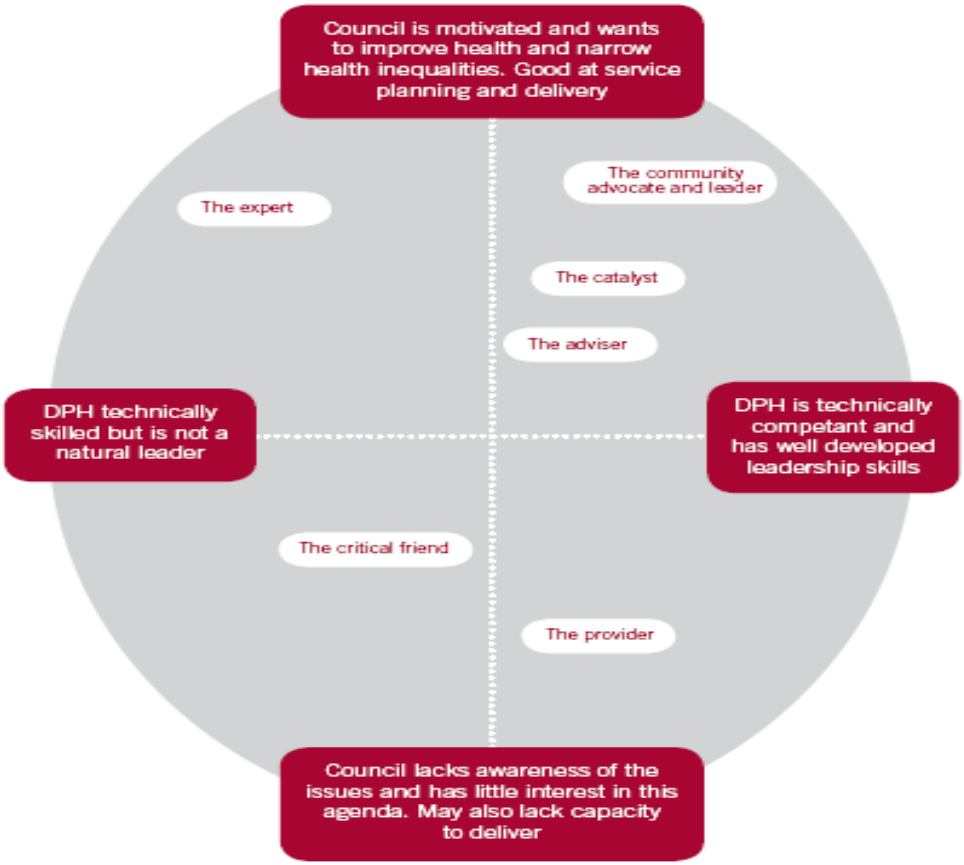
Public Health support within Bristol City Council: planning for synergy

NHS Bristol



Relationship between Public Health and Local Government: the critical friend

NHS Bristol



The DPH is firmly independent of the executive leadership of the authority and can speak with professional freedom.

Elston, T. 2009 Health Appointments – 6 Models of Practice, In Hunter, D. (Ed) Perspectives on Joint Director of Public Health appointments, London: IdEA

Bristol City Council: Transport policy: Benefits of cycling and walking - Microsoft Internet Explorer provided by Bristol City

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Address http://www.bristol.gov.uk/ccm/content/Transport-Streets/Walking-Cycling/cycling-in-bristol/essential-evidence/essential-evidence.en;jsessionid=018CB238812DA2C3B21173FDD9BA163D.tcwwwaplaws: Go Links

3. Evidence hierarchy
4. Cycling and all cause mortality
5. Impact of highway traffic capacity reductions
6. Walking to health
7. Weight gain and car use
8. Physical activity - the best buy in public health
9. Bus use and deregulation
10. Cycle commuting
11. Walkable communities
12. Life change events and physical activity participation
13. Cycling reduces absenteeism at the workplace
14. A healthy school journey
15. Vision Zero
16. Objective monitoring, children's travel and physical fitness
17. Using pedometers to increase physical activity and improve health
18. The role of habit in travel behaviour
19. Unintended health impacts of road transport policies and interventions
20. Health Impact Assessment (HIA)
21. Obtaining a driving licence and interventions to influence the decision
22. Inverse Care Law
23. Mass Community Cycling Events
24. Economic Benefits of Cycling
25. Cycling Safety - Lessons from The Netherlands, Denmark and Germany
26. Effect of crime and neighbourhood on physical activity
27. Air Pollution
28. Public transport and physical activity
29. Illness arising from road transport
30. Cost benefit analysis of walking and cycle track networks
31. Walk in to Work Out
32. NICE Guidance
33. Assessment of the *Active* for Life Campaign
34. Evidence led policy or the art ofthe possible?
35. Urban Environment
36. Children's independent mobility
37. Impact of retirement on physical activity
38. Women and commuter cycling
39. Social Patterning
40. Effect of driving cessation on the elderly
41. The importance of "walkable" green spaces.
42. A convenient truth: Climate change mitigation from transport is good for health
43. Child physical activity and effect on body weight
44. Electrically assisted Cycling
45. Effective interventions to increase cycle use
46. Use of non-motorised modes and life stages
47. Stairs instead of escalators
48. Attitude-based targeting of mobility types for mode shift
49. Food deserts

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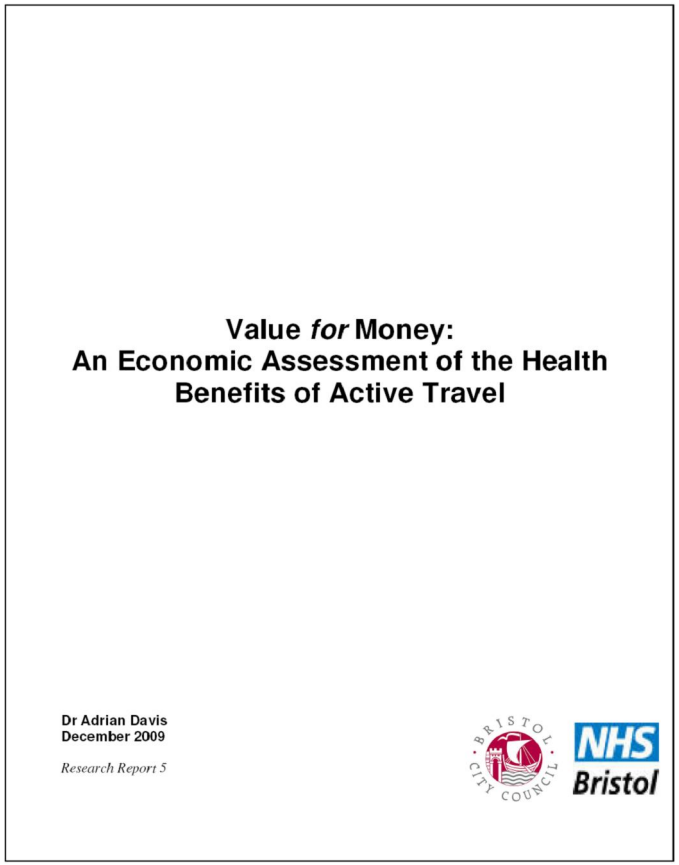
What's good for health is good for the Treasury

NHS Bristol



Value *for* Money:
An Economic Assessment of the Health Benefits of Active Travel

Dr Adrian Davis
December 2009

Research Report 5

Bristol City Council

NHS Bristol

Joint Local Transport Plan 3

A Consultation response from the West of England Directors of Public Health

Dr Pamela Akerman, Director of Public Health Bath and North East Somerset
Dr Hugh Annett, Director of Public Health Bristol
Becky Pollard, Director of Public Health North Somerset
Dr Chris Payne, Director of Public Health South Gloucestershire.

Local Sustainable Transport Fund

- LSTF (£560M) provides opportunity for local transport authorities to bid for funds for packages of sustainable travel measures with a **primary focus of supporting economic growth and reducing carbon**
- £25M bid with public health specialist leading on 2 of 10 projects, providing strong evidence-based input

West of England Partnership

NHS
Bristol
North Somerset
South Gloucestershire
Bath and North East Somerset

Memorandum of Understanding

This Memorandum of Understanding is between the local authorities of Bath & North East Somerset, Bristol City, North Somerset and South Gloucestershire who together make up the West of England Partnership and the Health Sector for the Partnership Area through the Directors of Public Health for the area.

The purpose of the Memorandum of Understanding is to promote effective co-ordination and co-operation between the organisations in relation to transport and health.

The key principles are of openness, explanation and discussion together with shared responsibility and ownership of problems and solutions.

It is not legally binding.

The Health Sector in the West of England Partnership area is currently made up of:

- The Four Primary Care Trusts of NHS Bath and North East Somerset, NHS Bristol, NHS North Somerset, NHS South Gloucestershire
- A large number of Service Providers, which are commissioned by the PCTs to deliver NHS services for local residents. These include major Hospital Trusts, providers of community services, General Practices, dentists, opticians, and pharmacies.

We take health to mean not just the needs of individuals with specific illnesses and conditions, but also the promotion and protection of good health and the reduction of health inequalities, now and in the future.

This is a core duty of the Primary Care Trusts and of subsequent bodies that may result from the 2010 Health White Paper.

It is hereby agreed that:

Strategy

The Memorandum of Understanding partners will collaborate to promote and protect good health through delivery of the goals and ambitions set out in key Government policy documents and Local Development Frameworks.

The Health Sector will be key partners in the production of the four West of England authorities Joint Local Transport Plan 3 and will provide input, expertise and feedback in order to maximise health gains and minimise the acute and chronic disease burden.

The Memorandum of Understanding partners align, where practicable a programme and phasing of schemes for 2011 to 2026 for inclusion in the Delivery Plan of the Joint Local Transport Plan 3 and review programmes for each 3 year implementation phase.

Transport and Health Forum

To promote effective joint collaboration a transport and health forum will be established to seek to ensure that the transport system for the sub-region now and in the future is designed in such a way that it enhances health, wellbeing and prosperity for all residents, and contributes to reducing health inequalities.

It will achieve this by;

- Bringing together relevant expertise and representation from Transport and Health sectors.
- Building strong and constructive working relationships between the Health Sector and the Transport sector.
- Using best available evidence to inform planning and decision making.
- Using the principles of 'Health Impact Assessment' to inform planning at the earliest stages of option development.
- Including access to health facilities for staff, patients and visitors.
- Producing and monitoring the Action Plan.

The Forum will report to the Joint Transport Executive Committee

Support

Directors of Public Health will provide updates for and attend meetings of the Joint Transport Executive Committee on a twice-yearly basis to consider progress on the Action Plan.

Information and Data collection

Information requests between Memorandum of Understanding partners will be managed as quickly as is reasonable depending on the complexity of the request and information available. Requests are to be as specific as possible.

Communications

A joint framework on communications will be established in order to promote levels of engagement and partnership working between the Memorandum of Understanding partners.

Timescale and review

The Memorandum of Understanding shall come into immediate effect. The West of England Partnership authorities and Health Sector for the West of England area will jointly review the arrangements set out in the Memorandum of Understanding at two yearly intervals.

Dated 17 September 2010

NHS Bristol

NHS Bath and North East Somerset

NHS North Somerset

NHS South Gloucestershire

Bath & North East Somerset Council

North Somerset Council

South Gloucestershire Council

Bristol City Council: Roads - speed limits: 20mph Speed Limit Pilot Areas - Microsoft Internet Explorer provided by Bristol Cit

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Address http://www.bristol.gov.uk/ccm/content/Transport-Streets/Road-Safety/20-mph/20mph-speed-limit-pilot-areas.en;jsessionid=71E77CB8E8A3D12CEEC9439A562EC081.tcwww Go Links

20mph Speed Limit Pilot Areas

Sections: Information about the 20mph speed limit and its benefits | Public engagement leaflets | Frequently asked questions | Your opportunity to respond to the statutory (formal) consultation | Monitoring | Health and community issues | Contact us

Information about the 20mph speed limit and its benefits

Bristol City Council's Cycling City project, in partnership with the Active Bristol programme are proposing to introduce pilot 20mph speed limits across two residential areas at Inner East Bristol and Inner South Bristol.

Pilot area maps

- Inner East Bristol Pilot Area
  Wards affected: Ashley, Easton, Eastville, Lawrence Hill, St George West
- Inner South Bristol Pilot Area
  Wards affected: Bedminster, Lawrence Hill, Southville, Windmill Hill

Objectives

The primary objective is to make walking and cycling around these areas safe and more attractive thereby

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Being *there*

NHS Bristol

- Informal opportunities to get health impacts included
- Being a source of knowledge to hand (eg Joint Local Transport Plan3 and Cycling City)
- Building trust
- Windows of opportunity
- Cost effective

Lessons learnt

NHS Bristol

- Leadership from Tier 1 is vital
- Need for specialist with sufficient knowledge/training in both disciplines
- Embedded post enables dialogue with all staff. Regular Tiers 2 & 3 briefings essential
- Public health USPs - leverage in support of transport case for low carbon economy

The future

NHS Bristol

Return to local government offers chance to:

- embed public health across Councils to improve pop. health
- break through ‘silo’ mentality
- build trust and effectiveness/synergy
- improve cost effectiveness